Healthcare Personnel (HCP) Vaccine Factsheet

Recommended Vaccine	Indications and Screening Requirements	Vaccine Doses	Special Considerations
Hepatitis B (Hep B)	HCPs at risk for exposure to blood or body fluids; Screening: Serology - hepatitis B surface antibody (anti-HBs)	3 - dose series @ 0, 1, 6 months	HCPs who are not immune after 3 doses of hepatitis B vaccine, should receive an additional series of 3 doses and be re-tested for immunity 1-2 months after the 3 rd dose. HCP who do not respond after 6 doses should be considered susceptible to hepatitis B and counseled accordingly.
Influenza (Flu)	All HCPs Annual vaccination with current seasonal vaccine. No serology required	1- dose annually	No evidence exists of risk to mother of fetus when the vaccine is administered to a pregnant woman. Live attenuated influenza vaccine (LAIV) is recommended only for healthy persons, aged 2 – 49 years who are NOT pregnant.
Measles, mumps, and rubella (MMR)	All HCPs Persons who lack evidence of immunity (laboratory confirmation of disease or immunity or vaccination [2 doses of live measles and mumps vaccine, and at least 1 dose of live rubella vaccine]) and considered for those born before 1957. Screening: Serology - IgG for measles, mumps and rubella	2- doses at least 28 days apart	HCP vaccinated from 1963–1967 with only a killed measles vaccine, killed vaccine followed by live vaccine, or a vaccine of unknown type should be revaccinated with 2 doses of live measles vaccine. MMR is contraindicated for persons who are pregnant; immunocompromised, including persons with HIV-infection; who have recently experienced anaphylaxis to gelatin-containing products or neomycin; and who have recently received immune globulin.
Tetanus, diphtheria, pertussis (Tdap)	All HCPs No serology required.	1- dose Give as soon as feasible if not already received and regardless of interval from last Td.	After receipt of Tdap, give Td for routine booster every 10 years. Because of the importance of tetanus vaccination, persons with history of anaphylaxis to components in Tdap or Td should be referred to an allergist to determine whether they have a specific allergy to tetanus toxoid (TT) and can safely receive vaccine.
Varicella (Chickenpox)	All HCPs without evidence of immunity, prior vaccination, or diagnosis/verification of varicella disease by a healthcare provider.	2 doses 4-8 weeks apart if aged ≥13 years	Because 71%93% of adults without a history of varicella are immune, serologic testing before vaccination is likely to be cost-effective.
	Screening: Serology - Varicella IgG Vaccination of HCP in C	Cortain Circ	umetancos
Maningagaga	Clinical/research microbiologists who might	1- dose	If HCP remains at increased risk a booster dose
Meningococcal (Meningitis)	routinely be exposed to isolates of <i>Neisseria</i> meningitides.		is recommended in 5 years.
Hepatitis A (Hep A)	HCPs with who have close contact with high- risk HAV-infected primates or who work in research laboratory setting	2-doses, 6-12 months apart	Twinrix (HepA and HepB combination) can be used for HCPs 18 years and older. Administer 3-doses at 0, 1, 6 months.
Zoster (Shingles)	All HCP 60 years of age and older	1- dose	ACIP recommends HCP receive zoster vaccine if they are in the recommended age group.
Polio (IPV)	HCPs at high risk for exposure for polioviruses	3- dose series @ 0, 1, 6-12 months	
Typhoid (TY)	HCPs in microbiology laboratories who frequently work with <i>Salmonella</i> typhi.	1- dose; booster dose every 2 years	Booster doses if continued exposure to Salmonella typhi.
Rabies	Pre-exposure vaccination is recommend for high-risk groups, such as veterinarians, animal handlers, rabies researchers, and certain laboratory workers.	1.0 mL IM on days 0, 7, and 21 or 28	Either Human diploid cell vaccine (HDCV) or purified chick embryo cell vaccine (PCECV) may be used.

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FREQUENTLY ASKED QUESTIONS

What laws and regulations govern HCP vaccinations?

• Federal regulations through the Occupational Safety and Health Administration (OSHA)'s <u>Bloodborne Pathogen Standard</u> <u>1910.1030(f)</u> require employers to offer the Hepatitis B vaccination to all employees who have contact with blood and other potentially infectious materials.

What are the new Aerosol Transmissible Diseases (ATD) Standards?

• The new ATD Standard - Title 8 CCR; Section 5199 was mandated on August 5, 2009 for all medical facilities (e.g. hospitals, skilled nursing facilities) regardless of size, location or specialty. The standard requires HCP at risk of exposure to diseases like measles receive appropriate immunizations or show evidence of immunity. www.dir.ca.gov/title8/5199.html

Why are vaccinations important for HCP?

• Maintaining high vaccine-coverage levels among HCPs is vital to ensuring the health and safety of patients as well as

Who qualifies as a HCP?

• All paid and unpaid persons working in healthcare settings who have potential for exposure to patients and/or to infectious materials, including body substances, contaminated medical supplies and equipment, contaminated environmental surfaces, or contaminated air (CDC, 1/25/2011). Is this from a MMWR?

What should you do for HCPs who have fallen behind on their vaccinations?

• If the series is delayed between doses, **do not** restart the series. Continue the series until the HCP has completed the recommended number of doses.

Who is required to report a communicable disease?

Medical doctors, osteopaths, veterinarians, podiatrists, nurse practitioners, physician assistants, nurses, nurse midwives, infection control practitioners, medical examiners, coroners, dentists, and administrators of health facilities and clinics knowing of a case or suspected case of a communicable disease are required to report it to the local health department (CCR, Title 17, Section 2500). In addition, anyone in charge of a public or private school, kindergarten, boarding school, or preschool also is required to report these diseases (Section 2508). Laboratories are required to report certain communicable diseases (Section 2505)

Where can I find information on reporting and testing requirements for Vaccine-Preventable Diseases (VPD)?

• The Acute Communicable Disease Control Manual (B-73) contains information on both reporting and testing requirements for VPDs as well as other communicable diseases. A copy of the manual can be downloaded at http://publichealth.lacounty.gov/acd/Professionals.htm. For more information on VPD reporting requirements contact the Immunization Program at (213) 351-7800.

Where can I find information regarding contraindications and precautions to vaccines?

- CDC's Guide to Vaccine Contraindications and Precautions
 http://www.cdc.gov/vaccines/recs/vac-admin/downloads/contraindications-guide-508.pdf
- Immunization Program <u>http://publichealth.lacounty.gov/ip/providers/B71.htm</u>

Where can I find general information regarding HCPs?

http://www.cdc.gov/niosh/topics/healthcare/

